AASI for Cerebrovascular Disease (CVA/Stroke/TIA)

All classes (01/25/2023)

AME Assisted Special Issuance (AASI) is a process that provides AMEs the ability to reissue an airman medical certificate under the provisions of an Authorization for Special Issuance of a Medical Certificate (Authorization) to an applicant who has a medical condition that is disqualifying under Title 14 of the Code of Federal Regulations (14 CFR) part 67.

An FAA physician provides the initial certification decision and grants the Authorization in accordance with 14 CFR § 67.401. The Authorization letter is accompanied by attachments that specify the information that treating physician(s) must provide for the re-issuance determination. If this is first-time application for an AASI for the above disease/condition, and the applicant has all the requisite medical information necessary for a determination, the AME must defer and submit all of the documentation to the AMCD or RFS for the initial determination.

AMEs may re-issue an airman medical certificate under the provisions of an Authorization, if the applicant provides the following:

- An Authorization granted by the FAA; and
- Annual current, detailed Clinical Progress Note generated from a clinic visit
 with the treating neurologist no more than 90 days before the AME exam. It
 must include a detailed interim summary; current medications, dosage, and side
 effects (if any); physical exam findings; results of all testing performed;
 diagnosis; assessment and plan (prognosis); and follow-up.
 - It must specifically describe if there has been any change in symptoms, exam findings, or control of risk factors.
- Brain MRI (report with comparison to prior studies) every 24-months.

<u>AME must defer</u> and describe in Block 60 what item(s) caused the deferral if the neurologist evaluation or AME exam identifies any of the following:

- An interval change or worsening of the condition;
- New neurologic symptom(s), diagnosis, or episode focal or non-focal including a new CVA/Stroke/TIA based on symptoms or imaging;
- Atrial fibrillation or atrial flutter new onset or not previously reported;
- Bleeding which required medical intervention;
- New or not previously reported neurologic diagnosis or disqualifying medical condition or therapy;
- Physical exam changes identified by either the neurologist or AME; and/or
- Inadequate risk factor control new risk factor identified OR inadequate control of known risk factors such as hypertension, hyperlipidemia, diabetes, smoking, hypercoagulable conditions, and/or obstructive sleep apnea.